

**Crescenta Valley High School  
National Honor Society  
Student Activity Form**

*Directions: Please complete all sections. **DO NOT BE MODEST.** Please include all information that would give a complete picture of your service and leadership qualifications. Include the name and telephone number of the adult sponsor, even if they are on campus at CVHS. With this application, please provide evidence showing that you have a Weighted GPA of 3.5 or higher **via a screenshot submitted to Google Classroom.** Turn in all parts to your application on Google Classroom by **September 28th 3:30 PM.***

**MUST BE TYPED! HANDWRITTEN APPLICATIONS WILL NOT BE ACCEPTED!**

*Completion of this form does not guarantee selection.*

**I. Administrative Information**

Name:

AKA:

ID#:

Year of Graduation:

E-mail:

Schedule:

Period	Class	Teacher	Room Number






**In addition to those activities mentioned above, I feel I have demonstrated leadership in the following ways (50-250 words):**

**IV. Co-curricular Activities** – List all activities in which you have participated during high school. Include clubs, teams, musical groups, etc. and major accomplishments in each.

Activity	Hours per Year				Organization	Adult Contact	Email/Phone
	9	10	11	12			

**V. Local Bylaws:** *(Please read carefully, answer questions, and sign below)*

The National Honor Society constitution requires each chartered chapter to meet certain criteria, including payment of dues, active participation of all members in regularly scheduled meetings, and a group service project. In keeping with the National Honor Society constitution, CVHS officers and members voted on the following obligations for all members for the 2019-2020 school year.

- A. Pay \$10 NHS dues and turn in bylaws upon **acceptance (please do not bring these with your application).**

- B. Actively participate in the organization by attending at least ½ of all scheduled meetings.
- C. Fundraise for NHS club activities and service projects by participating in the official CLUB fundraiser.
- D. Participate in the designated NHS service events (3 hours of NHS events per semester).
- E. Complete 75 hours YEARLY service to both the school and community combined (to be registered each semester on a Form C).

**If** accepted into membership in NHS, do you agree to cheerfully and responsibly participate as an active member?

Yes \_\_\_\_\_ No \_\_\_\_\_

**Why do you want to be member of a service organization such as NHS? (50-250 words)**

**If you wish to provide details of circumstances or qualifications not reflected in the application, you may do so in the space below. (0-150 words)**

***I understand that completing this form does not guarantee selection to NHS, and that the information presented here is accurate. (Please electronically sign by typing in full name)***

Student Name:

Signature:

Date:

I have read the information provided by my son/daughter on this form and can verify that it is true, accurate, and complete in its presentation.

Parent Name:

Signature:

Date: